

CLAIMS ONLY						Application Number 10698867	Filing Date		
						Applicant(s)			
						* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1	1								
2									
3		1							
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50									
Total Indep									
Total Depend									
Total Claims									